840573

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549



hoi	urs per тоги	••
- [	SEC USE ONLY	
Pre	efix S	erial
1_		
- 1	DATE RECEIVED	

## FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

Filing Under (Check box(es) that apply):	[] Rule 504	[ ] Rule 505	[x] Rule 506	[] Section	1 4(6) [x	1 ULOE
Type of Filing: [x ] New Filing [] An					(-/ [	•
	A. BASIC IDE	NTIFICATION	DATA	<del></del> _		
I. Enter the information requested abo	out the issuer					
Name of Issuer ([] check if this is an	amendment and	d name has char	nged, and indic	cate change.)		
Bio-Lok International Inc.				_		
Address of Executive Offices (Number	and Street City	State Zin Cod	e) Telenhone I	Number (Includ	dina Area	Code)
			•	-	any Area	Code)
368 S. Military Trail, Deerfield Be			•	8-9998	mig Alea	
	each, FL 3344	2	954-69	8-9998		
368 S. Military Trail, Deerfield Be Address of Principal Business Operation	each, FL 3344	2	954-69	98-9998 Telephone N	umber	
368 S. Military Trail, Deerfield Be Address of Principal Business Operation of different from Executive Offices)	each, FL 3344	2	954-69	98-9998 Telephone N	umber	
368 S. Military Trail, Deerfield Be Address of Principal Business Operation if different from Executive Offices) n/a	each, FL 3344	2	954-69	98-9998 Telephone N	umber	JESS
368 S. Military Trail, Deerfield Be Address of Principal Business Operation if different from Executive Offices) n/a Brief Description of Business	each, FL 3344	2	954-69	98-9998 Telephone N	umber	JESS
368 S. Military Trail, Deerfield Be Address of Principal Business Operation if different from Executive Offices) In/a Brief Description of Business Dental Product Manufacturer	each, FL 3344	2	954-69	98-9998 Telephone No	umber PROC	<del>) ESS</del>
368 S. Military Trail, Deerfield Beaddress of Principal Business Operation if different from Executive Offices)  1/a  Brief Description of Business  Dental Product Manufacturer  Type of Business Organization	each, FL 3344 ons (Number an	<b>2</b> ad Street, City, S	<b>954-69</b> tate, Zip Code)	98-9998 Telephone No	umber PROC	<del>) ESS</del>
368 S. Military Trail, Deerfield Beaddress of Principal Business Operation if different from Executive Offices)  1/a  Brief Description of Business  Dental Product Manufacturer  Type of Business Organization  x] corporation []	each, FL 3344 ons (Number an	2	954-69 tate, Zip Code)	98-9998 Telephone N	umber PROC	<del>) ESS</del>   8 200

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

		A. BASIC IDENTIF	ICATI	ON DATA			
Enter the information     Each promoter of the     Each beneficial own     a class of equity secu     Each executive office     partnership issuers;     Each general and managements	e issuer, if the er having the purities of the is er and director and	issuer has been orga power to vote or dispo suer; r of corporate issuers	ose, or and of	direct the vote	or disposition		
Check Box(es) that Apply:	[ ]Promoter	[X] Beneficial Owner	[X]	Executive Office	er [X] Director	r [	] General and/or Managing Partne
Full Name (Last name first, i	f individual)						
HOLLANDER, BRUCE	E.L.						
Business or Residence Addr 312 S. Military Trail, D	,	•	p Code)	)			
Check Box(es) that Apply:	[ ]Promoter	[X] Beneficial Owner	[X] E	xecutive Officer	[X] Director	r (	[ ]General and/or Managing Partne
Full Name (Last name first, i	f individual)					•	
Business or Residence Addr 312 S. Military Trail, D	-	•	p Code)	)			
Check Box(es) that Apply:	[] Promoter	[ ] Beneficial Owner	[ ] E	xecutive Officer	[X] Director	[]	General and/or Managing Partner
Full Name (Last name first, i	f individual)						
Business or Residence Addr 312 S. Military Trail, D	,		p Code)	)			
Check Box(es) that Apply:	[] Promoter	[ ] Beneficial Owner	[ Exe	ecutive Officer	[X] Director	[]	General and/or Managing Partner
Full Name (Last name first, i	f individual)						
Business or Residence Adda 312 S. Military Trail, D	·	•	p Code)	)			
Check Box(es) that Apply:	[] Promoter	[] Beneficial Owner	[X] E:	xecutive Officer	[ ] Director	[]	General and/or Managing Partner
Full Name (Last name first, i	f individual)						
Business or Residence Addr	ess (Number ar	nd Street, City, State, Zi	p Code	)			·····

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

312 S. Military Trail, Deerfield Beach, FL 33442

				B. INFO	RMAT	ION ABO	UT OF	FERING				
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									No [ <b>X</b> ]			
Ans	wer also i	n Append	lix, Colum	nn 2, if filin	g under	ULOE.						
2. What is the minimum investment that will be accepted from any individual?								•	\$ 75,0	000		
3. Does the offering permit joint ownership of a single unit?									No [ ]			
indirect sales of deal of more	tly, any co of securitie ler registe than five	ommissions in the correct with the (5) person	on or simil offering. If the SEC a ons to be I	ar remune a person to and/or with	ration for the lister a state ssociate	ho has been solicitation of solicitation of solicitation of solicitation of states, I sed persons	on of pu sociated ist the na	rchasers i person or ame of the	in connect agent of a broker or	ion with broker dealer	n r	
Full Na	me (Last n	ame first, i	f individua	!)								
Capita	ilink, L.C											
Busines	s or Resid	ence Addr	ess (Numb	er and Stre	et, City,	State, Zip C	ode)					
One A	lhambra	Plaza, S	Suite 141	0, Coral (	3ables,	FL 33134	ļ					
Name o	of Associat	ed Broker	or Dealer									
				Solicited		ds to Solici	t Purcha	isers			[] All Sta	ates
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[СТ] Х	[DE]	[DC]	[FL] X	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ] X	[MM]	[NY] X	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Nai	me (Last n	ame first, i	f individua	))		•						
Business	s or Residen	ice Address	(Number a	nd Street, Cit	y, State, Z	Zip Code)			<del>-</del>			
Name of	Associated	Broker or	Dealer									
States	in Which	Person L	isted Has	Solicited	or Inten	ds to Solic	it Purcha	asers				
(Check	"All Sta	tes" or ch	eck indiv	idual State	s)	••••••					[] All S	tates
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[XT]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

1. Enter the aggregate offering price of securities included in this offering and amount already sold. Enter "0" if answer is "none" or "zero." If the transactic exchange offering, check this box [ ] and indicate in the columns below the am the securities offered for exchange and already exchanged.	on is an			
Type of Security		Aggregate Offering Price	Am	nount Already Sold
Debt	\$	Chemig 1 nec	\$	- 0 -
Equity		2 750 000	\$	- 0 -
• •	\$	3,750,000	Φ	- 0 -
[X] Common [] Preferred				
Convertible Securities (including warrants)	\$	- 0 -	\$	- 0 -
Partnership Interests	\$	- 0 -	\$	- 0 -
Other (Specify).	\$	- 0 -	\$	- 0 -
Total	\$_	3,750,000	\$	- 0 -
Answer also in Appendix, Column 3, if filing under ULOE.				
2. Enter the number of accredited and non-accredited investors who have pure securities in this offering and the aggregate dollar amounts of their purchase offerings under Rule 504, indicate the number of persons who have purchased so and the aggregate dollar amount of their purchases on the total lines. Enter "0" it is "none" or "zero."	ses. For ecurities			Aggregate
	Nι	ımber Investors		llar Amount Purchases
Accredited Investors		-0-	\$	0.00
Non-accredited Investors		-0-	\$	0.00
Total (for filings under Rule 504 only)	<u>\$</u>		<u>\$</u>	0.00
Answer also in Appendix, Column 4, if filing under ULOE.				
3. If this filing is for an offering under <u>Rule 504</u> or <u>505</u> , enter the information re for all securities sold by the issuer, to date, in offerings of the types indicated, th (12) months prior to the first sale of securities in this offering. Classify securities listed in Part C-Question 1.	e twelve			
	Tv	pe of Security	Do	llar Amount
Type of offering	.,	po or occurry	¢	Sold
Rule 505			. \$ \$	
Rule 504	-		\$	
Total	_		\$	· · · · ·
4. a. Furnish a statement of all expenses in connection with the issuance and dis of the securities in this offering. Exclude amounts relating solely to organization ex of the issuer. The information may be given as subject to future contingencie amount of an expenditure is not known, furnish an estimate and check the box to of the estimate.	xpenses s. If the			
Transfer Agent's Fees		[ ] \$		
Printing and Engraving Costs				
Legal Fees		[X ] \$	7,	500
Accounting Fees				<del></del>
Engineering Fees			225	<u> </u>
Sales Commissions (specify finders' fees separately)		[X]\$	225,	<u> </u>
Total			232,	500

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

b. Enter the difference between the aggregato Part C - Question 1 and total expenses for Question 4.a. This difference is the "adjust"	urnished in response to	Part C- \$	3,517,500
5. Indicate below the amount of the adjusted groor proposed to be used for each of the purpose purpose is not known, furnish an estimate and estimate. The total of the payments listed must est to the issuer set forth in response to Part C - Qu	es shown. If the amount I check the box to the left qual the adjusted gross pr	for any t of the	
			Payments To
Calarina and face			
Salaries and fees			_ []\$
Purchase of real estate		l 1 \$	[]\$:
Purchase, rental or leasing and installation of m and equipment		[]\$	_ []\$
Construction or leasing of plant buildings and fa	cilities	[]\$	[]\$
Acquisition of other businesses (including the vainvolved in this offering that may be used in excassets or securities of another issuer pursuant t	hange for the	[]\$	_ []\$
Repayment of indebtedness	**************	[]\$	_ []\$
Working capital	**************	[]\$	[X] \$ <u>1,517,500</u>
Other (specify): Sales and Marketing		[]\$	[X] \$ <u>2,000,000</u>
		[]\$	_ []\$
Column Totals		[]\$	[X] \$ <u>3,517,500</u>
Total Payments Listed (column totals added)		[X] \$_	3,517,500
(Continued from page 4)			
* Does not include placement agent warrants for	r the purchase of a maxim	um of 5,000,000 com	non shares at an
exercise price of \$.75 each.			
D. 1	FEDERAL SIGNATURE		
The issuer has duly caused this notice to be signunder Rule 505, the following signature constiture Exchange Commission, upon written request of accredited investor pursuant to paragraph (b)(2)	tes an undertaking by the its staff, the information fu	issuer to furnish to the	U.S. Securities and
Issuer (Print or Type)	Signature //		Date / /
BIO-LOK INTERNATIONAL INC.	1 / In		2/10/05

## ATTENTION:

President

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

Name of Signer (Print or Type)

Bruce L. Hollander